



# APPLICATION

## Kitchen & Special Fire Suppression Systems

Name of Project: \_\_\_\_\_ Submittal Date: \_\_\_\_\_

Project Address (range): \_\_\_\_\_

City's Permit Number: \_\_\_\_\_ Installing Contractor's City of Chula Vista Business License #: \_\_\_\_\_

Installing Contractor: \_\_\_\_\_ Contractor License #: \_\_\_\_\_

Contractor Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Company / Person paying for permit: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

**Check/Mark ✓ if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.**

✓	#	Kitchen Fire Suppression Systems [per line item]	Fee	x Qty	Subtotal \$
	8.1	Kitchen Fire Suppression Systems [base fee for first 10 nozzles, per system]	\$393.00		\$
	8.2	Per additional group of 10 nozzles [or fraction thereof]	\$66.00		\$

\*Line items are additive.

**TOTAL** \$**Check/Mark ✓ if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.**

✓	#	Special Fire Suppression Systems [per line item]	Fee	x Qty	Subtotal \$
	11.1	Special Fire Suppression Systems [base fee is per system and shall incorporate 11.2 or 11.3]	\$524.00		\$
	11.2	Clean Agent System [FM 200, Inergen, CO2, etc.]	\$262.00		\$
	11.3	Water Mist or Dry Chemical	\$131.00		\$

\*Line items are additive.

**TOTAL** \$**REMIT TO:**CHULA VISTA FIRE DEPARTMENT • FIRE PREVENTION DIVISION • 447 F Street • Chula Vista, CA 91910  
Phone (619) 691-5055 • Fax (619) 691-5057**OFFICIAL USE:**

Deposit Account # 15900-3743

Accepted by: \_\_\_\_\_ Date: \_\_\_\_\_